



**Great Conversations:  
Understanding the  
Key Ingredients for  
Successful Frontline  
Visits**

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**Welcome**

*We're excited to meet you.*

# Meet Your Breakout Team Leaders



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# Disclosures

**No conflicts of  
interest**

**No financial or  
non-financial  
relationships of  
concern**

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# Today's Goals



## You'll walk away from this session with:

- A sense of why AD is critical in supporting frontline clinicians
- An understanding of the basic components of building a program
- Exposure to each step of a 1:1 educational visit
- A chance to connect with other global peers

# Level Setting: WHERE ARE YOU AT?

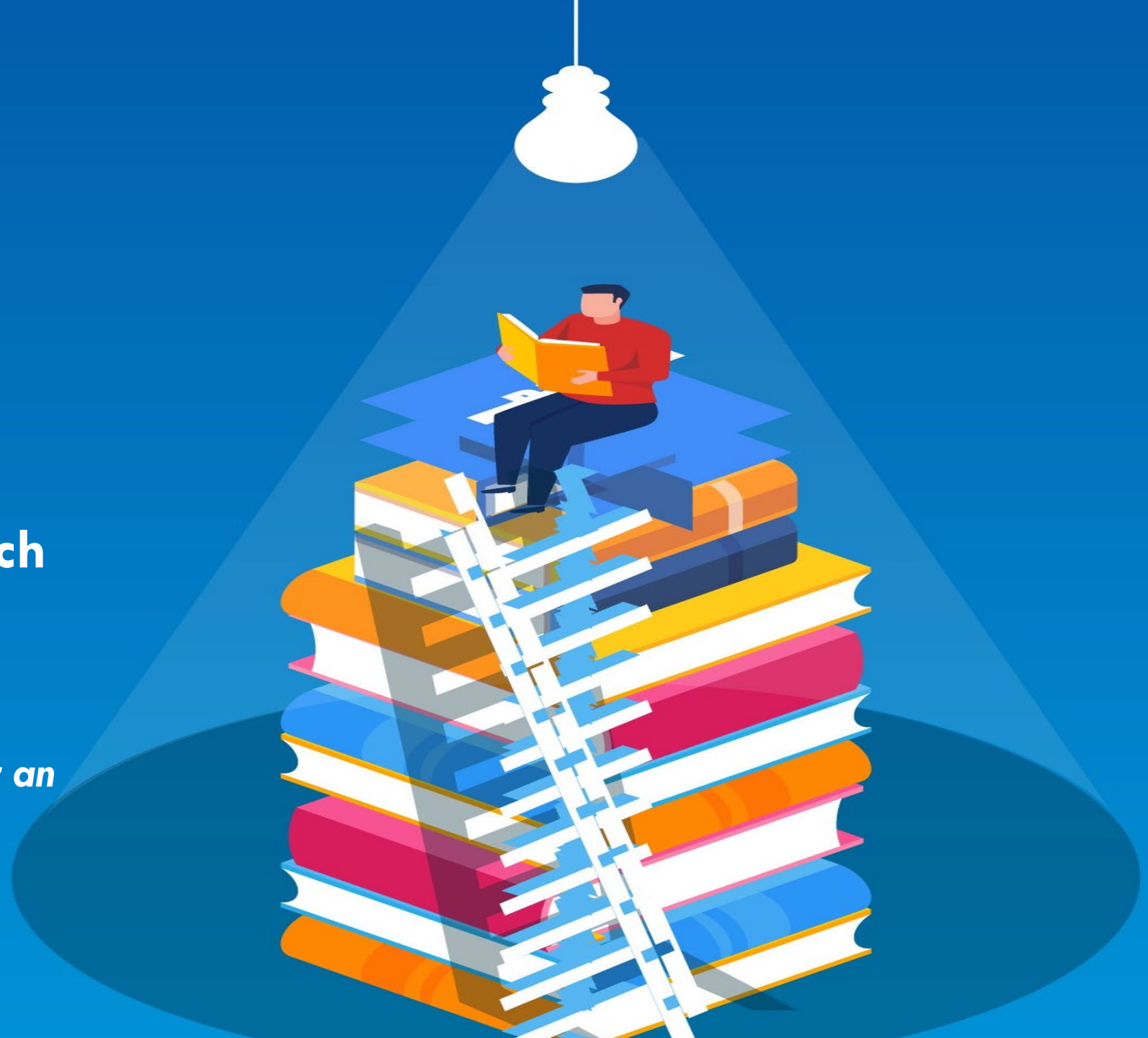
*Type in the chatbox:*

**On a scale of 1-10, how much do you know about AD?**

*0 = I know pretty much nothing at all.*

*5 = I know a bit, but I'm nowhere near an expert.*

*10 = I'm an AD whiz!*



# What's "AD"?

- **It's 1:1 educational outreach in a clinician's office (or online)**
  - Never a lecture—always interactive
  - Assesses individual needs and provides customized support
  - Uses compelling visual aids to share best evidence
  - Encourages specific behavior changes using action-based key messages
- **The visit ends with a mutually agreed-upon commitment to specific practice changes**
- **Over time, the relationship is strengthened, based on trust and usefulness**

# Why “AD”?

**Clinicians want the best outcomes for their patients, but many obstacles are in their paths.**

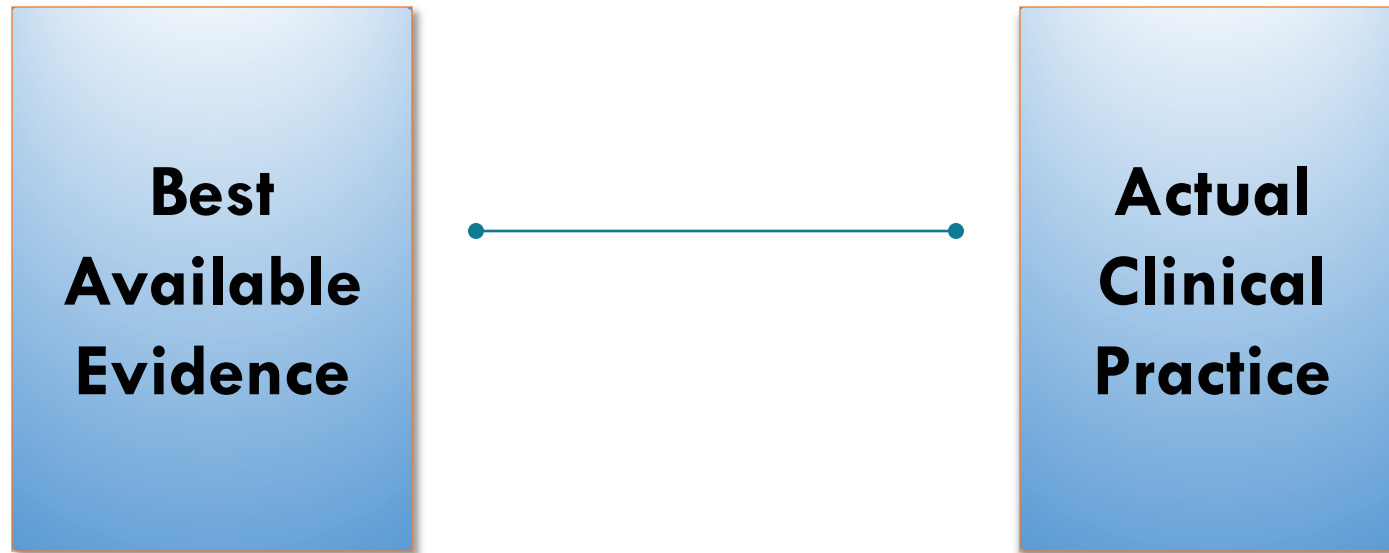
*Type in the chatbox:*

**Type 1 obstacle or challenge that a busy clinician who is practicing right now is facing.**



# The Goal of Academic Detailing

**Closing the gap between:**



# Elements of a Successful AD Program

## Identifying gaps in care

**What's the gap between evidence and frontline care?**

## Defining intervention goals

**How can detailing support clinicians in closing the gap?**

## Recruiting & training detailers

Delivering 1:1 clinician visits **(we'll be focusing on this today!)**

## Evaluation & assessment



# The Structure of a 1:1 Visit





*Quick  
Mock Detailing  
Session*



**Kicking Off  
with a  
Strong  
Introduction**

*Type in the chatbox:*

**Think of meeting someone  
new in any context.**

*What would make a “bad” first  
impression?*



# From an Expert: Sharing a Strong Intro

## Pro Tips

Impactful detailers begin their visits with an intro that's engaging, succinct, and clear.





## Next: Conducting a Needs Assessment

**What does the clinician  
value, know, and need?**

How can you find out?

**Ask the right questions.**

(And make sure they're open-ended!)

# Exploring Needs Assessment: Small group chat!

**You'll have 5 minutes to:**

1. Meet each other!
2. Figure out: **2 great needs assessment questions** a detailer could ask a clinician

*TIP: Don't ask yes or no questions!*



# Small Group Logistics



- The discussion goals will be available to view in your chatbox
- You can request help from the host if you need assistance from the NaRCAD team

*We'll see you in 5 minutes!*

# WELCOME BACK

*Share your best needs assessment question with us!*

**Raise your hand and we'll unmute you!**

(Shy? Type it in the chatbox!)

**We'll reflect on a few and then move on to the next step.**





What's

NEXT

## Key Message Delivery

# What's a Key Message?

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- After asking the right questions to understand what a clinician needs, a key message is delivered using language that is **action-oriented and specific.**





## *Examples of strong key messages:*

- ✓ Use non-opioid treatment as first-line therapy for your patients experiencing chronic pain.
- ✓ Screen all patients over 65 using the gait and mobility test.
- ✓ Offer treatment options to patients with substance use disorder.
- ✓ Use a standardized sexual health history questionnaire to determine which patients are at high risk of contracting HIV.

# From an Expert: Delivering Impactful Key Messages Pro Tips



# Preparing for Objections

**Why wouldn't a clinician  
want to adopt the message  
you deliver?**

**Raise your hand and we'll  
unmute you!**

*(Shy? Type it in the chatbox!)*







## Addressing Objections: Active Listening & Ongoing Needs Assessment

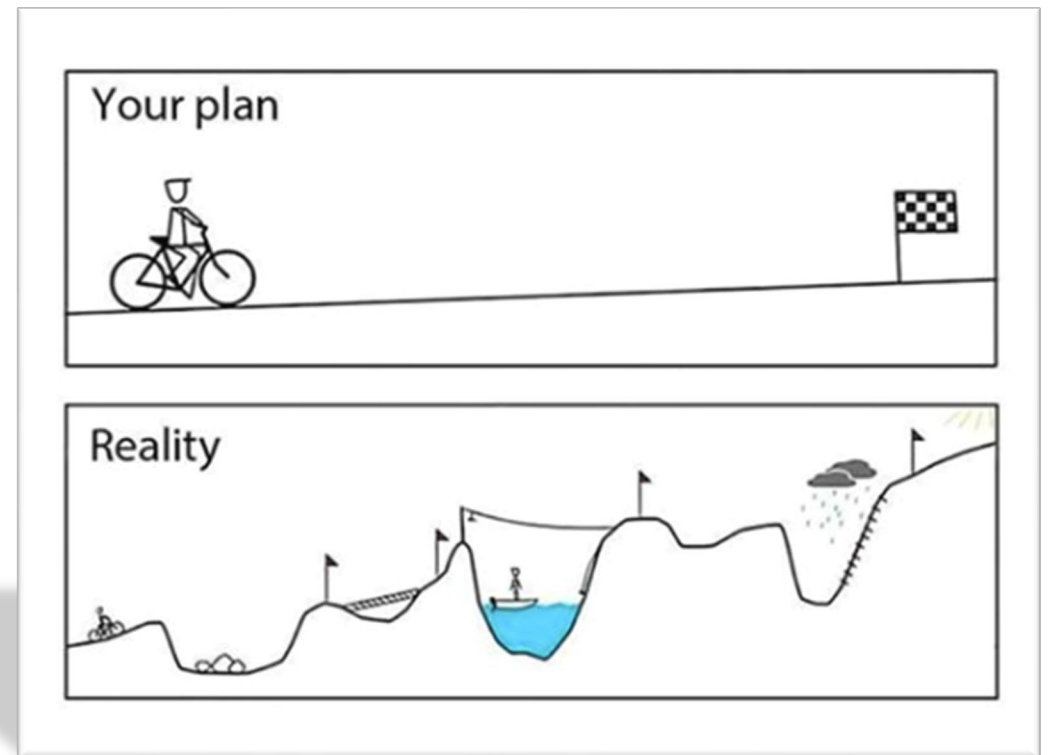
**Respond to a clinician's objection by:**

- ✓ **validating/empathizing with the objection**
- ✓ **asking a new needs assessment question**
- ✓ **trying a different approach or way of framing the message**

# Most Common Objections and Challenges

## *Experiences from the field*

- ✓ **Time!**
- ✓ **Resources** (*staff, equipment, space, money, training*)
- ✓ **Disbelief in evidence**
- ✓ **Other behavioral challenges**
- ✓ **Stigma**



# Exploring Objections: Small group chat!



**You'll have 10 minutes:**

1. One person present a key message and the other person respond with an objection. (Don't have key messages for your campaign yet? Use this one! *Create an individualized exercise program in partnership with patients to improve strength, gait, and balance.*)
2. Discuss together how you would handle this objection.
3. Swap roles and do it again!

# Small Group Logistics



- The discussion goals will be available to view in your chatbox
- You can request help from the host if you need assistance from the NaRCAD team

*We'll see you in 10 minutes!*

# WELCOME BACK

*Share how it went!*

**Raise your hand and we'll unmute you!**

(Shy? Type it in the chatbox!)

**We'll reflect on a few and then move on to the next step.**



# Summary & Close:

*Asking for a Commitment to a Specific Practice Change*



**Example of a specific, measurable ask:**

*“Can you try screening the next 3 patients over 65 with this new tool, and I can check in with you in 2 weeks to see how it went?”*

P<sub>3</sub> A<sub>1</sub> T<sub>1</sub> I<sub>1</sub> E<sub>1</sub> N<sub>1</sub> C<sub>3</sub> E<sub>1</sub>

**Behavior change  
takes time.**

*AD is all about:*

- ✓ **Building trusting relationships**
- ✓ **Meeting clinicians where they're at**
- ✓ **Follow-up and support**



The image features five white bowls filled with various fresh salads. The top-left bowl contains sliced cucumbers, arugula, purple onions, and cubed tofu. The top-middle bowl has arugula, chickpeas, shredded carrots, and sliced avocado. The top-right bowl is filled with shredded purple onions and a dark, possibly marinated, protein. The bottom-left bowl includes cubed tofu, pine nuts, arugula, and sliced cucumbers. The bottom-right bowl contains fresh cilantro, golden-brown chips, and a hard-boiled egg. The text "The Final Product" is overlaid in a white, cursive font across the center of the image.

*The Final Product*



**Questions?**

**Type your questions into the chatbox or raise your hand and we'll unmute you.**

**We'll get to as many questions as we can!**



# NaRCAD

## Technical Assistance

### Program Building

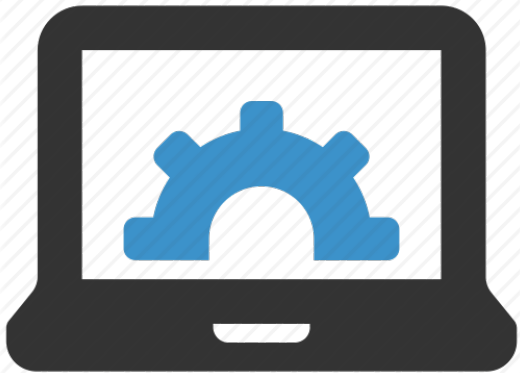
- In-person trainings, webinars, and ongoing virtual support, including training videos, resources, & more.

### Zoom Support

- Follow-up to help you trouble shoot your visits and deal with challenges along the way.

### E-mail Support

- Unlimited guidance, resource requests, & troubleshooting.





**Please rejoin the main room now  
by clicking on the link in the chatbox.**